

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	HL		6-15-01
O.I.P.E. CLASSIFIER		12	6/15
FORMALITY REVIEW	BZ	503-883	08-29-01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)..... Canceled A Appeal
 + Restricted O Objected

Claim	Date
Final Original	
1	3
2	9
3	1
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If more than 150 claims or 10 actions
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Form 1
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